

STATEMENT OF ECONOMIC INTERESTS

Date Received
Official Use Only

COVER PAGE

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A Public Document

NAME (LAST)	(FIRST)	(MIDDLE)			
Wagenknecht	Brad	D.			
MAILING ADDRESS (Business Address Acceptable)	STREET	CITY	STATE	ZIP CODE	OPTIONAL: E-MAIL ADDRESS

1. Office, Agency, or Court

Name of Office, Agency, or Court:

County of Napa

Division, Board, District, if applicable:

Board of Supervisors

Your Position:

Board Member, District 1

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: See attached list

Position:

2. Jurisdiction of Office (Check at least one box)

☐ State

☒ County of Napa

☐ City of

☐ Multi-County

☐ Other

3. Type of Statement (Check at least one box)

☐ Assuming Office/Initial

Date: / /

☒ Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

☐ The period covered is / / through December 31, 2009.

☐ Leaving Office

Date Left: / /

(Check one)

☐ The period covered is January 1, 2009, through the date of leaving office.

-or-

☐ The period covered is / / through the date of leaving office.

☐ Candidate

Election Year: / /

4. Schedule Summary

► Total number of pages including this cover page: 4

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☒ Yes - schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 ☐ Yes - schedule attached
Investments (10% or Greater Ownership)

Schedule B ☐ Yes - schedule attached
Real Property

Schedule C ☐ Yes - schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D ☒ Yes - schedule attached
Income - Gifts

Schedule E ☐ Yes - schedule attached
Income - Gifts - Travel Payments

-or-

☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed March 23, 2010

Signature

STATEMENT OF ECONOMIC INTERESTS

1. Office, Agency or Court Expanded List:

<u>Agency</u>	<u>Position</u>
Napa County Board of Supervisors	Board Member
Napa County Board of Equalization	Board Member
Silverado Community Services District	Board Member
Lake Berryessa Resort Improvement District	Board Member
Napa-Berryessa Resort Improvement District	Board Member
Monticello Public Cemetery District	Board Member
Napa County Public Improvement Corporation	Board Member
Napa County Housing Authority	Board Member
Flood Control & Water Conservation District	Board Member
Flood Protection & Watershed Improvement Authority	Board Member
In-Home Supportive Services Public Authority of Napa County	Board Member
Bay Area Air Quality Management District	Board Member
San Francisco Bay Conservation & Development Commission	Board Member
County Medical Services Program	Board Member
Local Agency Formation Commission	Commissioner
First Five, Napa County Children & Families Commission	Commissioner
Napa-Vallejo Waste Management Authority	Alternate Board Member
Upper Valley Waste Management Agency	Alternate Board Member
Regional Council of Rural Counties	Alternate Board Member
Treasury Oversight Committee	Alternate Board Member

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Brad Wagenknecht

► NAME OF BUSINESS ENTITY
 Umpqua Bank

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
 Banking

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income of \$0 - \$500
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
 Charter Oak Bank

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
 Banking

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income of \$0 - \$500
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
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☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
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 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

Comments: _____

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Brad Wagenknecht

► NAME OF SOURCE
 Winegrowers of Napa County
 ADDRESS (Business Address Acceptable)
 P.O. Box 5937, Napa, CA 94559
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Winegrowers Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 11 / 09	\$ 65.00	Lunch
/ /	\$	
/ /	\$	

► NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE
 California State Association of Counties
 ADDRESS (Business Address Acceptable)
 1100 K Street, Sacramento, CA 95814
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Association of Counties

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 17 / 09	\$ 187.10	Dinner
12 / 03 / 09	\$ 130.74	Dinner
/ /	\$	

► NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

Comments: _____
